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THE MEDICAL POLICE

AND

RULES AND REGULATIONS

OF THE

BOSTON MEDICAL ASSOCIATION,

WITH A CATALOGUE OF THE

OFFICERS AND MEMBERS.

BOSTON:
PRINTED BY DAVID CLAPP.—391 WASHINGTON ST.
1864.

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BOSTON MEDICAL POLICE.

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At a meeting of the BOSTON MEDICAL ASSOCIATION, *held at Vila's on the first Wednesday in March*, 1808 —

The Committee of the preceding year having, in conformity with their instructions, reported on a code of Medical Police, which was read and accepted by sections —

IT WAS VOTED, That the Report of the Committee be recommitted, with instructions to print five hundred copies of the same; and that they present to each member of the Association three copies of the Report, and distribute the remaining copies to such other physicians of the State as they may think proper.

VOTED, LIKEWISE, That the thanks of the Association be presented to the Committee for their judicious and useful Report.

J. GORHAM, *Secretary.*

BOSTON MEDICAL POLICE.

THE Standing Committee of the Association of Boston Physicians for the year commencing on the first Wednesday of March, 1807, having been instructed to propose a code of Medical Police, to be submitted to the consideration of the Association at their next annual meeting, beg leave to report:—

1. That, having examined the different publications of Gregory, Rush and Percival upon this subject, they first selected from them such articles as seemed most applicable to the circumstances of the profession in this place.

2. That, with these articles as a groundwork, they have proceeded to form a short system of police, containing general principles for the government of this Association, by making such alterations or additions to them as they thought necessary for rendering them both practicable and useful.

3. That they have added such new articles as they judged conducive to the general views of this Association, and adapted to the particular situation of medical practice in America.

The result of which is submitted in the form following:

CONSULTATIONS.

Consultations should be encouraged in difficult and protracted cases, as they give rise to confidence, energy, and more enlarged views in practice. On such occasions, no rivalship or jealousy should be indulged; candor, justice, and all due respect should be exercised towards the physician who first attended; and, as *he* may be presumed to be best acquainted with the patient and his family, he should deliver all the medical directions, as agreed upon. It should be the province, however, of the senior consulting physician to propose the necessary questions to the sick.

The consulting physician is never to visit without the attending one, unless by the desire of the latter, or when, as in sudden emergency, he is not to be found. No discussion of the case should take place before the patient or his friends; and no prognostications should be delivered, which were not the result of previous deliberation and concurrence. Theoretical debates, indeed, should generally be avoided in consultation, as occasioning perplexity and loss of time; for there may be much diversity of opinion on speculative points, with perfect agreement on those modes of practice which are founded, not on hypothesis, but on experience and observation. Physicians in consultation, whatever may be their private resentments or opinions of one another, should divest themselves of all partialities, and think of nothing but what will most effectually contribute to the relief of those under their care.

If a physician cannot lay his hand to his heart, and say that his mind is perfectly open to conviction, from whatever quarter it may come, he should in honor decline the consultation.

All discussions and debates in consultations are to be held secret and confidential.

Many advantages may arise from two consulting together,

who are men of candor, and have mutual confidence in each other's honor. A remedy may occur to one which did not to another; and a physician may want resolution, or a confidence in his own opinion, to prescribe a powerful but precarious remedy, on which, however, the life of his patient may depend: in this case a concurrent opinion may fix his own. But when such mutual confidence is wanting, a consultation had better be declined, especially if there is reason to believe that sentiments delivered with openness are to be communicated abroad, or to the family concerned; and if, in consequence of this, either gentleman is to be made responsible for the event.

The utmost punctuality should be observed in consultation-visits; and, to avoid loss of time, it will be expedient to establish the space of *fifteen minutes*, as an allowance for delay, after which the meeting might be considered as postponed for a new appointment.

INTERFERENCES.

Medicine is a liberal profession; the practitioners are, or ought to be, men of education; and their expectations of business and employment should be founded on their degrees of qualification, not on artifice and insinuation. A certain undefinable species of assiduities and attentions, therefore, to families usually employing another, is to be considered as beneath the dignity of a regular practitioner, and as making a mere trade of a learned profession; and all officious interferences, in cases of sickness in such families, evince a meanness of disposition unbecoming the character of a physician or a gentleman. No meddling inquiries should be made concerning them, nor hints given relative to their nature and treatment, nor any selfish conduct pursued, that may, directly or indirectly, tend to weaken confidence in the physicians or surgeons who have the care of them.

When a physician is called to a patient, who has been under the care of another gentleman of the Faculty, before any examination of the case, he should ascertain whether that gentleman understands that the patient is no longer under his care; and, unless this be the case, the second physician is not to assume the charge of the patient, nor to give his advice,—excepting in instances of sudden attacks,—without a regular consultation; and if such previously attending gentleman has been dismissed, or has voluntarily relinquished the patient, his practice should be treated with candor, and justified so far as probity and truth will permit; for the want of success in the primary treatment of the disorder is no impeachment of professional skill and knowledge.

It frequently happens that a physician, in incidental communications with the patients of others, or with their friends, may have their cases stated to him in so direct a manner as not to admit of his declining to pay attention to them. Under such circumstances his observations should be delivered with the most delicate propriety and reserve. He should not interfere in the curative plans pursued, and should even recommend a steady adherence to them, if they appear to merit approbation.

DIFFERENCES OF PHYSICIANS.

The differences of physicians, when they end in appeals to the public, generally hurt the contending parties; but, what is of more consequence, they discredit the profession, and expose the Faculty itself to contempt and ridicule. Whenever such differences occur as may affect the honor and dignity of the profession, and cannot immediately be terminated, or do not come under the character of violation of the special rules of the Association otherwise provided for, they should be referred to the arbitration of a sufficient number

of members of the Association, according to the nature of the dispute; but neither the subject-matter of such references, nor the adjudication, should, if it can be avoided, be communicated to the public, as they may be personally injurious to the individuals concerned, and can hardly fail to hurt the general credit of the Faculty.

DISCOURAGEMENT OF QUACKERY.

The use of quack medicines should be discouraged by the Faculty, as disgraceful to the profession, injurious to health, and often destructive even of life. No physician or surgeon, therefore, should dispense a secret nostrum, whether it be his invention or exclusive property; for, if it is of real efficacy, the concealment of it is inconsistent with beneficence and professional liberality; and, if mystery alone give it value and importance, such craft implies either disgraceful ignorance or fraudulent avarice.

CONDUCT FOR THE SUPPORT OF THE MEDICAL CHARACTER.

The *esprit du corps* is a principle of action founded in human nature, and, when duly regulated, is both rational and laudable. Every man, who enters into a fraternity, engages, by a tacit compact, not only to submit to the laws, but to promote the honor and interest of the Association, so far as they are consistent with morality and the general good of mankind. A physician, therefore, should cautiously guard against whatever may injure the general respectability of the profession, and should avoid all contumelious representations of the Faculty at large, all general charges against their selfishness or improbity, or the indulgence of an affected or jocular scepticism concerning the efficacy and utility of the healing art.

FEES.

General rules are adopted by the Faculty, in every town, relative to the pecuniary acknowledgments of their patients; and it should be deemed a point of honor to adhere to them; and every deviation from, or evasion of, these rules should be considered as meriting the indignation and contempt of the fraternity.

Gratuitous services to the poor are by no means prohibited: the characteristical beneficence of the profession is inconsistent with sordid views and avaricious rapacity. The poor of every description should be the objects of our peculiar care. Dr. Boerhaave used to say they were his best patients, because God was their paymaster.

It is obvious, also, that an average fee, as suited to the general rank of patients, must be an inadequate compensation from the rich (who often require attendance not absolutely necessary), and yet too large to be expected from that class of citizens who would feel a reluctance in calling for assistance, without making some decent and satisfactory remuneration.

EXEMPTION FROM CHARGES.

All members of the medical profession, together with their families, should be attended gratuitously; but visits should not be obtruded officiously, as such civility may give rise to embarrassments, or interfere with that choice on which confidence depends.

But distant members of the Faculty, when they request attendance, should be expected at least to defray the charges of travelling.

Omission to charge, on account of the wealthy circumstances of the physician, is an injury to the profession, as it is defrauding, in a degree, the common funds for its support, when fees are dispensed with which might justly be claimed.

VICARIOUS OFFICES.

Whenever a physician officiates for another by his desire, in consequence of sickness or absence, if for a short time only, the attendance should be performed gratuitously as to the physician, and with the utmost delicacy towards the professional character of the gentleman previously connected with the patient.

SENIORITY.

A regular and academical education furnishes the only presumptive evidence of professional ability, and is so honorable and beneficial, that it gives a just claim to preëminence among physicians at large, in proportion to the degree in which it may be enjoyed and improved. Nevertheless, as industry and talents may furnish exceptions to this general rule, and this method may be liable to difficulties in the application, seniority among practitioners of this town should be determined by the period of public and acknowledged practice as a physician or surgeon in the same. This arrangement, being clear and obvious, is adapted to remove all grounds of dispute among medical gentlemen; and it secures the regular continuance of the established order of precedency, which might otherwise be subject to troublesome interruptions by new settlers, perhaps not long stationary in the place.

JOHN WARREN,
LEMUEL HAYWARD,
JOHN FLEET.

SOME REMARKS

ON THE

PROPRIETY AND ADVANTAGES OF A FEE-TABLE.

An agreement among physicians in regard to a Fee-table would not be justifiable on the score of humanity, if such agreement implied that a physician would not afford his aid unless he received a stated compensation, nor indeed if it made any compensation essential for his services. It will hardly be disputed, that medical men do not fall short of those of any other profession in their gratuitous services to the poor. Strange indeed would it be, while their studies are constantly bringing before their minds the wisdom and goodness of God their Creator, if they should not be disposed to extend their aid to the sick and suffering from any other motive than a reward to themselves. But men without fortune would not enter the profession of medicine, if they did not look to their labors, as men do in other professions, for an adequate maintenance, and, if successful, for the accumulation of some property. With us, almost every one who engages in medical studies is altogether dependent on his business for support. The fees are indispensable; so much so that the young practitioner is liable to the temptation of undervaluing his services for the attainment of immediate support; and those who are no longer young may also offer their services at a low price, hoping to compensate themselves by an increased amount of business. This will be done by those who think more of the amount of business than of the services due to their patients.

It is at this point that we may consider what is for the interest of the public,—what is for the interest of the sick, who look to the physician or surgeon for their cure. Which would be best, that the medical men should contend who would do the work for the lowest fees, or that they place their claims on their education, or their devotion to their profession, and on whatever goes to make up the qualifications for the proper management of the sick,—in short, on their professional skill and merit? It is true that professional skill and merit are not always duly recognized and rewarded: the battle is not always to the strong. But, in general, the strong will ultimately succeed in the contest; and it is better for the community that every medical man should rely on his qualifications to be truly useful, than that he should be compelled to struggle with his neighbor and brother as to which would serve the sick at the lowest rate.

From this view of the subject, we conclude that the establishment of a uniform fee-table among physicians and surgeons living in the same city, or in a near vicinity, is justifiable and proper.

In this country it is believed that the fees are more or less definitely adjusted by the members of the Faculty in the larger towns and cities. In Boston a fee-table was established probably more than a century ago. We know that there was one about the year 1788, the period of the greatest depression after the Revolution. The fee for a visit was four shillings, or sixty-seven cents; and other fees were in proportion. About ten years later, there was an advance on the fees of about fifty per cent; that for a visit being a dollar. In 1808, the expenses of living, as well as the wealth of the town, had greatly increased; and the charge for a visit was raised to a dollar and a half, with additions, more or less, for other services. Since that time, there have been occasional alterations; but there has not been any general change in the tariff for medical services. In the

table of 1808, a new principle was introduced, authorizing a reduction of the fees to persons of moderate property, or of very limited incomes.

The ground on which an increase of fees for medical and surgical services is now deemed requisite and proper is, that, since the last fee-table was adopted, the expenses and style of living have increased very much, and most especially within the last fifteen years. It is, no doubt, on that account that the medical fees have been raised in New York, Philadelphia and Baltimore within a few years; while it is well known that house-rent and other necessary expenses are at least as high in Boston as in those cities.

With regard to the principles on which a fee-table should be constructed, it may be assumed that the fees should be high enough both to induce men of talents and good character to enter the medical profession; and also to satisfy them, so that they should never cease to study their art, and to cultivate all branches of science which would aid them in it. The physician should be able to obtain a subsistence in the early years of his life by such a moderate share of business as can be obtained in those years; and, if successful and fully occupied after he has arrived at middle life, he should be able to live in a style consistent with his rank in society, and to make provision for his old age, or for such a family as he may leave behind him. Likewise it would be well that there should be so much latitude in the arrangements respecting fees, that the younger members of the profession should be allowed to make lower charges than would be satisfactory to those in full practice.

Physicians and surgeons would never obtain a support from the poor: they must be served without charge. With us, in Boston, there is abundant provision for them in the Dispensary, the Alms-house, or House of Industry, and the Massachusetts General Hospital. Besides, none of our medical men refuse to render their gratuitous services, when necessary; and this is done, not only to those known as

poor, but to many who have "seen better days," and yet struggle to maintain a style of gentility.

There is a large middle class, able and willing to render a compensation for medical services, who cannot pay such fees as those services are entitled to, especially for long sicknesses. If dependent on such as these only, the income of physicians would not be sufficient to attract to their ranks men of talents, nor such as are able to devote much time and money to their preliminary education.

In all large cities there are multitudes of men whose wealth enables them to pay for the best services from medical men, and who will not be satisfied unless they obtain what they consider as such. Boston has its full share of these wealthy men. A reliance on the support to be derived from them encourages the student to resort to all proper means to qualify himself for their service.

Under the circumstances here stated, the proper course seems to be to make a discrimination in the recompense demanded for medical services. Such a result must probably be brought about in all instances, more or less perfectly, by the necessity of the case, without any special arrangement. In the fee-table adopted in Boston, in 1808, and in that which has now been adopted, and which here follows, the principle is openly recognized and acted upon. This fee-table does not state absolutely what the full fee shall be in any case. The general plan of it is to state a minimum in each case. In the table of 1808, a minimum was stated for the charge; but it was provided that a deduction of one-third might be made from the amount of a bill, whenever the circumstances of the patient seemed to require it. In the present table, there is named for each service the limits within which the fee shall be placed, though not designing to prohibit a higher charge where the time devoted, or the great importance of the service rendered, should call for it; nor, on the other hand, to forbid a deduction to those in limited circumstances, in proportion to the exigencies of the case.

May, 1851.

RULES AND REGULATIONS.

At the Annual Meeting of the BOSTON MEDICAL ASSOCIATION, *held May* 2, 1864 —

DRS. J. MASON WARREN, GEORGE BARTLETT, CHARLES E. BUCKINGHAM, GEORGE H. GAY, CHARLES D. HOMANS and JAMES C. WHITE were appointed a Committee to revise the Rules and Regulations and Fee-Table of the Association, and to report upon the same at a special meeting.

At a special meeting of the Association, held June 13, 1864 —

The above-appointed Committee submitted the following report, which was accepted and ordered to be printed.

IT WAS ALSO VOTED, That a new edition be printed of the Medical Police and Rules and Regulations of the Association, as amended by the Special Committee, together with a Catalogue of the Officers and Members.

REPORT.

In pursuance of their duty, your Committee would briefly refer to some of the successive phases through which the Fee-Table has passed during the last seventy or eighty years. In 1788, as stated in the letter appended to the Rules and Regulations, the fee for an ordinary visit was four shillings, which in 1800 was raised to one dollar. In 1808 it was again raised to a dollar and a half, with the right reserved to the practitioner to make a discount of one third in cases of necessity. Thirteen years ago it was raised again to two dollars; but in view of the fact that such a fee would be beyond the means of many patients to pay, a sliding scale was adopted, by which it was provided that, in such cases, a minimum fee might be charged of one dollar. It was also further provided that, "in every case, in settling his account, the practitioner might make any deduction which he conscientiously believed that the circumstances of the patient rendered necessary."

It is now thought necessary, in view of the recent great increase in the expenses of living, that the fee be again raised, making it three dollars instead of two, subject as heretofore to any deduction which may be rendered necessary by the pecuniary circumstances of the patient. It has been thought best to substitute a single fixed fee for the visit, in place of the sliding scale adopted in the last Fee-Table, for reasons which have been fully discussed at the annual meeting.

RULES AND REGULATIONS.

I. THERE shall be a stated meeting of the BOSTON MEDICAL ASSOCIATION on the first Monday in May, annually.

II. At every stated meeting there shall first be chosen a Chairman to preside at the same; and then there shall be chosen by ballot a Secretary and a Standing Committee of five members, who shall continue in office until the next stated meeting, and until others are elected in their room.

III. It shall be the duty of the Secretary to keep a record of the proceedings of the Association and those of the Standing Committee, whose meetings he shall attend for this purpose, and to perform such other services as are pointed out in other regulations.

IV. It shall be the duty of the Standing Committee to attend to and decide on all matters which regard the honor or interest of the Association, especially to act upon all infringements of its regulations which may come to their knowledge, and to call special meetings of the Association when they judge proper. In all cases there may be an appeal from the judgment of the Standing Committee to the Association. This Committee shall fill any vacancy in their own body, or in the office of Secretary, which may occur by death or resignation, until the next stated meeting of the Association.

V. It shall be the duty of the Secretary to call a special meeting of the Association, whenever directed so to do by the Standing Committee, and likewise whenever seven mem-

bers of the Association request him in writing so to do. In the cases of both stated and special meetings, he shall send a notification, printed or written, to each member, one week at least before the day of meeting.

VI. It shall be considered disreputable to consult with any irregular practitioner.

VII. If a physician be called to a patient who has usually been attended by another physician, on account of the urgency of the case or the absence of the regular physician, he shall, before leaving, direct that the latter be sent for to continue the attendance, if necessary; and in no case shall he continue his visits, unless he receive subsequent notice from the patient that his continued attendance is desired.

VIII. When a physician, engaged to attend a case of midwifery, is absent, and a second delivers the patient, the second shall receive the fee, and relinquish the patient to the first. If the first arrive while the second is present, and before the patient is delivered, the second shall resign the patient to the first.

IX. The members of this Association shall charge for their professional services the fees in the following table, subject, however, to the several rules contained in this code relative to the same.

For each visit, either medical, surgical, or obstetrical, in cases of regular attendance, ... $3.00

For the first visit in a new case, it shall be considered proper to make a charge of from three to five dollars, and a similar charge should be made in cases in which but a single visit is required. In cases also of extraordinary service, detention, or attendance, or when, for any reason, the case is one of unusual importance or responsibility, the charge should be proportionally increased; and the duty to make such increased charge shall be considered obligatory upon the practitioner.

For a visit in consultation, from . . . . . 5.00 to 10.00

In case of a consultation, the attending physician may also charge the usual consultation fee instead of the fee for an ordinary visit. For each subsequent visit in consultation, where the attendance is continuous, the fee may be from three to five dollars.

For a visit after 9 P.M. and before 8 A.M., from . 5.00 to 10.00

In cases of consultation or other extraordinary attendance in the night, the fee for such extra attendance shall be added to that for a night visit.

For attendance involving travel out of town, mileage shall be charged at a rate per mile, for short distances, of from . . . . . 1.00 to 2.00

In cases of longer distances, travelled by railroad, the mileage may be reckoned, according to the time saved to the practitioner, at from half a dollar to a dollar.

For advice at the physician's house, according to the importance of the case, unseasonableness of the hour, or time occupied, from . . . . 3.00 to 20.00

For a letter of advice, according to the importance of the case, or the time occupied, from . . . 10.00 to 20.00

For an opinion involving a question of law in which the physician may be subpœnaed, ... 50.00

The above charge shall also be allowed in cases in which the physician is subpœnaed in consequence of an opinion obtained under any other pretext, but which is afterwards sought to be introduced as evidence in a suit or action. Also for attendance in court as an expert.

In case of an opinion involving special study or experimental investigation, such additional service shall be charged in proportion to the time and labor expended.

In case of detention in court as an expert, or in a matter involving a professional opinion, for each day's attendance after the first, the fee shall be fifty dollars.

For a certificate of health, ... 5.00

For a post-mortem examination in a case of legal investigation, 50.00

For do. made at the request of the family or relations of the deceased, ... 20.00

For vaccine inoculation, ... 5.00

It is recommended that in the treatment of gonorrhœa or syphilis, the first charge shall be from five to ten dollars, the subsequent charges to be as in cases of ordinary attendance or advice.

Midwifery.

For attendance during labor in the day time, . . 20.00

For do. if any part of the attendance is in the night, . 30.00

For attendance during tedious labor, it shall be considered obligatory to make such additional charge as, in the discretion of the practitioner, the extraordinary detention or service shall seem to demand.

Obstetric operations, when necessary, shall be charged in addition to the usual fee for attendance.

In obstetrical practice all subsequent visits shall be charged as in ordinary cases of attendance.

In cases of labor when the child is born, but not the placenta, before the arrival of the accoucheur, the whole fee is to be charged. When both the child and placenta are born before the arrival of the accoucheur, half or the whole fee may be charged, according to circumstances. This rule is intended to apply to cases in which the services of the accoucheur have been previously engaged, and in which the delay does not arise from his fault.

If, in any case of labor, a second physician is called in consultation, and subsequently detained in joint attendance, both attending and consulting physicians shall be entitled to the full fee for attendance, and also to such additional amount as may be deemed proper in view of the importance of the case, the unseasonableness of the hour, or any extraordinary detention, or service rendered.

Operative Surgery.

For capital operations, or operations of unusual difficulty, such as amputations of large limbs, ligation of large arteries, operations for stone in the bladder, removal of breasts or of other large tumors, operations for cataract, for strangulated hernia, for vesico-vaginal fistula, for cleft palate, etc., according to the importance of the case and the pecuniary circumstances of the patient. 100.00 to 500.00

For operations of secondary importance or difficulty, such as operations for fistula in ano, for hare-lip, for the radical cure of hydrocele, tapping and injection of ovarian cysts, reduction of dislocations or fractures of large bones, amputation of fingers or toes, tracheotomy, removal of small tumors not involving important organs, passing catheter in cases of obstruction, ligature of arteries of secondary size, etc., ... 25.00 to 100.00

For minor operations, such as excision of tonsils, removal of nasal polypi, tapping for hydrocele or for ascites, opening abscesses, catheterism, stitching recent wounds, cupping, passing setons, excision of wens, etc., ... 5.00 to 25.00

After surgical operations, all subsequent visits shall be charged as in ordinary cases of attendance.

X. It is not designed by these regulations to prevent the members of this Association from rendering their services gratuitously to persons who are incapable of remunerating them without distressing themselves or their families; and in every case, in settling his account, the practitioner may make any deduction which he conscientiously believes that the circumstances of the patient render necessary.

XI. No member of this Association shall omit charging any necessary visits made on the same day, on account of their number.

XII. No member of this Association shall make a previous contract with any family for a definite sum, as a remuneration for his annual attendance on that family.

XIII. Those physicians of the adjoining towns who are members of the Massachusetts Medical Society, or have been licensed by it, shall be requested to conform, in their charges, to the fee-bill of this Association, whenever they attend patients in this town.

XIV. It is recommended that physicians present their accounts semi-annually, on the 1st of January and the 1st of July, or as much oftener as they may deem proper.

XV. Printed blanks may be used of the following form:—

to M.D.

For Professional Services,

XVI. The regulations of the Association shall be offered for subscription to all candidates for medical practice in this city, with whom the Fellows of the Massachusetts Medical Society may lawfully hold consultation; and the Secretary shall be charged with the execution of this regulation, with which he shall comply in every instance, so soon as he shall learn that any candidate of the above description may have established himself in this city; or, in case the Secretary has doubts, in any instance, respecting the propriety of offering the articles to any candidate above described, he shall call on the Standing Committee for advice and direction; and, in case any person to whom he offers the regulations shall refuse or neglect to sign the same, the Secretary shall make known such refusal or neglect to the Standing Committee.

XVII. Every candidate, at the time of becoming a member of the Association, shall sign the following obligation, which shall be in a book deposited with the Secretary:—

"The undersigned approve of the Regulations of the Boston Medical Association, and agree upon their honor to comply with the same."

XVIII. The members of this Association, after arriving at the age of sixty, may be exempted from all assessments, but in other particulars shall be governed by the rules and regulations of this Association.

XIX. The Secretary shall pay all expenses of this Association; and, as often as is necessary, he shall assess the amount due to him upon the members of the Association, equally, with the exception stated in the eighteenth rule. He shall employ, at the expense of the members, a person to collect the assessments; and, if any member refuses or neglects to pay his assessment, his connection with the Association shall thereupon cease, and the Secretary shall inform the members of the same by a circular note; and the assessment left unpaid shall become a charge against the Association.

XX. The Secretary's records and accounts shall be subject to examination by the Standing Committee, and by the Association, when they judge proper.

XXI. All resignations of members shall be made in writing to the Secretary, who shall immediately lay them before the Standing Committee, who shall either notify each member, or call a meeting of the Association, as they may think proper.

XXII. No rule or regulation of this Association shall be altered, amended, or repealed, nor any additional regulation adopted at any meeting, unless the proposed alteration or amendment has first been referred to a Committee, who shall report on the same at a subsequent meeting, which shall be held at a time not less than one month from the time of the appointment of the Committee. And no amendment or additional regulation shall be adopted, except by a vote of three-fourths of the members present.

MEMBERS

OF THE

BOSTON MEDICAL ASSOCIATION,

FROM ITS FORMATION IN 1806, TO JUNE, 1864.

ORIGINAL MEMBERS.

James Lloyd	Thomas Danforth
Samuel Danforth	Asa Bullard
Isaac Rand	John G. Coffin
John Jeffries	Jacob Gates
Charles Jarvis	John Dixwell
Lemuel Hayward	James Jackson
David Townsend	Benjamin Shurtleff
Thomas Kast	John C. Howard
John Warren	John C. Warren
Thomas Welsh	Cyrus Perkins
Aaron Dexter	Horace Bean
William Spooner	William Gamage
John Fleet, Jr.	John Randall
Isaac Rand, Jr.	John Gorham
William Ingalls	Thomas I. Parker

MEMBERS OF THE STANDING COMMITTEE.

	Elected.	Resigned.
John Warren	1806	1819
Lemuel Hayward	1806	1817
John Fleet, Jr.	1806	1813
Thomas Welsh	1808	1817
James Jackson	1808	1811
William Spooner	1811	1819

	Elected.	Resigned.
Aaron Dexter	1813	1817
John G. Coffin	1817	1828
John Gorham	1817	1829
George C. Shattuck	1817	1823
Samuel Adams	1819	1820
John Randall	1819	1843
Jacob Bigelow	1823	1850
George Hayward	1823	1853
John Ware	1828	1853
John B. Brown	1829	1843
John Homans	1843	1851
Enoch Hale	1844	1848
O. W. Holmes	1849	1851
J. Mason Warren	1850	1854
D. H. Storer	1851	1856
N. B. Shurtleff	1851	
Ephraim Buck	1853	1859
Henry W. Williams	1853	1857
William J. Dale	1854	
Silas Durkee	1856	
J. Mason Warren	1857	
George Hayward	1859	

SECRETARIES.

	Elected.	Resigned.
John Fleet, Jr.	1806	1807
John Gorham	1807	1811
George Bates	1811	1813
John B. Brown	1813	1815
George Hayward	1815	1818
E. D. Cushing	1818	1819
John Ware	1819	1825
J. P. Spooner	1825	1827
J. G. Stevenson	1827	1829
Winslow Lewis, Jr.	1829	1831
Joseph M'Kean	1831	1833
Martin Gay	1833	1835
D. H. Storer	1835	1837
Francis J. Higginson	1837	1837

Henry I. Bowditch	1837	1838
J. B. S. Jackson	1838	1842
A. Thomas	1842	1843
George A. Bethune	1843	1845
Charles E. Ware	1845	1846
Samuel Parkman	1846	1848
William J. Dale	1848	1849
E. W. Blake	1849	1852
Francis Minot	1852	1857
John B. Alley	1857	1862
Charles D. Homans	1862	

MEMBERS.

1806.

*James Lloyd
*Samuel Danforth
*Isaac Rand
*John Jeffries
*Charles Jarvis
*Lemuel Hayward
*David Townsend
*Thomas Kast
*John Warren
*Thomas Welsh
*‡‡Aaron Dexter
*William Spooner
*John Fleet, Jr.
*Isaac Rand, Jr.
*William Ingalls
*Thomas Danforth
*Asa Bullard
*John G. Coffin
*‡Jacob Gates
*John Dixwell
James Jackson
*Benjamin Shurtleff
*John C. Howard
*John C. Warren
*†Cyrus Perkins
*Horace Bean
*William Gamage
*John Randall
*John Gorham
*Thomas I. Parker

1807.

*Daniel Adams
*Samuel R. Trevett

1808.

*George C. Shattuck
*Daniel Newcomb
‡George Bates

1809.

*John B. Brown
†Benjamin James
*Joshua Thomas

1810.

Walter Channing
*†Nathaniel Bemis
Jacob Bigelow
†Auguste Lemosy
*†Joseph Lovell
†Daniel Cook

1812.

*Shirley Irving
*†John Revere
*Peter St. Medard
*Elisha Clap
*George Hayward

1813.

*Benjamin Read

* Deceased. † Left the city. ‡ Relinquished practice.

1814.
*†Oliver Prescott
*George Parkman
*‡†Amos Farnsworth
*John Gardner
*†Ezekiel D. Cushing
*Nathaniel Lovell
*La Fayette Perkins

1815.
*Asa Buckman
*†Andrew Foster
*Theodore Dexter
†Williams Bradford
*James Mann
*Abner Phelps

1816.
*†Pliny Hayes
*†Josiah Batchelder
*‡Samuel Clarke
*‡Edward H. Robbins, Jr.
*Zabdiel B. Adams
Solomon D. Townsend

1817.
*†Benjamin Austin, Jr.
*Joseph Bossuet
*John Ware
*†Peter G. Robbins
*David Osgood
‡†Nathaniel Niles
‡†Samuel A. Shurtleff
*Samuel Hemmenway
*Enoch Hale

1818.
*‡Samuel Adams
Edward Reynolds
*†‡John W. Webster
*†Thomas Pratt, Jr.
*†‡John S. Bartlett

1819.
*Woodbridge Strong
†William Sweetser
John Jeffries
*†Thomas W. Parsons
*†Frederick A. Parker
*†Jesse Smith
*Jamaliel Bradford
*Josiah F. Flagg
*Shelometh S. Whipple

1820.
†John Locke
*George B. Doane
*Chandler Robbins, Jr.
George Russell
†John P. Spooner
*†John D. Wells

1821.
*Caleb H. Snow
*†Joseph O. Osgood

1823.
*†‡Daniel Ingalls, Jr.
Jerome V. C. Smith
George W. Otis, Jr.
Edwin Adams
*Warren Abbott

1824.
Samuel Morrill
*†Erastus H. Bartlett
†William B. Duggan
*Moses Gage
Winslow Lewis
*†Augustus Plympton
*‡Joshua H. Hayward

1825.
*Thomas O. Folsom
*William H. Bass
*‡Hezekiah Eldredge
*Charles T. Hildreth
James Wilson
D. Humphreys Storer
*†Joshua B. Flint
*†Horatio Robinson
*†James M. Whittemore

1826.
†Theodore Kittredge
*†Charles W. Windship
*J. Greely Stevenson
John Flint
‡John C. Hayden
†Ralph Farnsworth
*Jonas H. Lane
‡Joseph Palmer
*†Edward G. Davis
*Joseph W. McKean
*Martin Gay

1827.
†‡Alexander Thomas
*John D. Fisher

Nathan C. Keep
Frederic A. Sumner
*†Francis Shurtleff
*†Henry S. Wade
*John B. Stebbins
†Walker Booth

1828.

†Joseph Clark
†Charles Choate
*†Benjamin Lincoln
†John O. Fay
*William Grigg
*†Philip I. Dumaresque
†George Stearns
*†Charles Walker
Benjamin T. Prescott
‡Charles G. Greene
*‡John H. Richards
*†Nathaniel Peabody
*†John A. Bulfinch
Charles H. Stedman
‡Giles H. Lodge
†Francis J. Higginson
*‡John C. Howard

1829.

‡Charles T. Jackson
Daniel T. Coit
†Nathaniel B. Shaler
*Thomas Gray, Jr.
John B. S. Jackson
John Homans
†D. H. Gregg
‡Edward J. Davenport
Henry Dyer

1830.

‡Daniel Harwood
Augustus A. Gould
*Calvin Ellis
*Marshall S. Perry
Abraham A. Watson
*†Thomas H. Thompson
*†Levi B. Gale
*Samuel H. Smith
*Albert Williams
George Bartlett
†J. Wilson
†Edward Warren

1831.

††‡Benjamin F. Wing
†Ambrose Seaton
*†James Wood
*‡William G. Hanaford
*‡Paul Simpson, Jr.
*Ebenezer Parker
Ezra Palmer, Jr.

1832.

*††Joseph Roby
*George W. Lane
Howard Sargent
††‡Josiah D. Hedge
‡Edward L. Cunningham

1833.

‡Caleb S. Whitman
†Asa B. Snow
†John Appleton
*††Jesse Chickering
*William E. Foster
Henry A. Ward
Charles G. Putnam
*†Alpheus Proctor
†Austin Flint
*James B. Gregerson

1834.

*James Jackson, Jr.
*†Josiah Kittredge
†John Odin
*†Samuel B. Swett
†William W. Dwight
Nathaniel B. Shurtleff
*†Henry Tuck
Francis H. Gray
†Joseph J. Fales
H. I. Bowditch

1835.

*Joseph Moriarty
Henry G. Clark
*Abner B. Wheeler
J. Mason Warren
*†Lewis J. Glover
*†Solomon Keep
George C. Shattuck
*E. W. Leach
Andrew Alexander

1836.

†Henry A. Dewar
Robert W. Hooper
*†J. Cullen Ayer
‡Oliver Wendell Holmes
†Albert T. Smith

John W. Warren
†William Ingalls
Richard H. Salter
‡Francis Dana
*Henry B. C. Greene
Warren J. Whitney
†Jonathan Leonard
†Alonzo Chapin
*Marcellus Bowen
Luther Clark
John H. Dix
‡Herman B. Inches
*Henry G. Wiley
George A. Bethune
Charles Gordon

1837.

*††Charles H. Peirce
†C. M. Weld
*Ephraim Buck
†John W. Gorham
George Hubbard
*†Jacob Hayes
††Jeffries Wyman
†Moore R. Fletcher
Charles E. Ware
*†Charles H. Wheelwright
Horace Dupee
*John Stevens
†Benjamin Haskell
†Benjamin E. Cotting

1838.

*Samuel Wigglesworth
*†William Eustis
†Stephen Salisbury
†Richard S. Young
†Samuel Fish
Joshua Tucker
‡Thomas M. Brewer
††Nathaniel S. Tucker
†J. T. Gilman Leach
*S. S. Bugbee
*†William Gordon

1839.

*†J. H. Dorr
*†C. C. Yates
††Benj. B. Appleton, Jr.
*Samuel Parkman
*Ephraim Buck, Jr.

1840.

Stephen Ball
Aaron P. Richardson
Henry J. Martin
Phineas M. Crane
†Ephraim Marston
†Augustus Whiting
††Ward N. Boylston
*J. F. W. Lane
†C. C. Holmes
†Nathan Warren Oliver
†Benjamin Mann
†Daniel Mann
*William Hawes
William J. Dale

1841.

George Tower
*Frederick A. Eddy
*†Jonathan Small
‡Charles Thacher
†John S. Butler
†William W. Cutler
‡Samuel Trull
Samuel L. Abbot
*William A. Briggs
†C. F. Foster
†E. O. Phinney
†Henry Orne Stone
Silas Durkee

1842.

Charles Mifflin
*W. T. Parker
†George A. Hammett
George Heaton
†Otis E. French
John A. Cummings
Louis M. I. Mignault
*†Geo. Friedrick Hartmann

1843.

†Eli Whitney Blake
William E. Coale
†G. Ware Gay
*Rufus L. Hinckley
George Hayward
†Edward Hall
William W. Morland
*John Spence, Jr.
Edward D. G. Palmer
George N. Thomson
†Cyrus S. Mann
Peter Renton
Samuel Cabot
Willard W. Codman

†J. Frazier Head
Moses W. Weld
†Alexander Jackson
†E. P. Le Prohon
Moses C. Greene
Henry J. Bigelow
*Edward Brooks, Jr.
†Jasper H. York
Joseph S. Jones
Charles A. Phelps
Le Baron Russell
†Alvan Bacon
Chas. E. Buckingham
†Wm. P. Dexter
E. G. Tucker
†Wm. Henry Thayer

1844.

†J. W. Holman
†Thomas F. Saxton
*Alfred A. Lane
Buckminster Brown
Wm. E. Townsend
†Estes Howe
*†Calvin Newton
†Horace Thurston
George Derby
†Benjamin L. Ball
*Ebenezer Stevens
*Albert G. Upham
††Elijah C. Drew
*John B. Walker
*†Jona. G. Morse
James M. Phipps
Calvin Stevens
†John S. Carter

1845.

David Thayer
Horace Stacy
†Levi Merrill
†Albert A. Hazard
*†Kimball Hill
Samuel Kneeland, Jr.
Fitch E. Oliver
George H. Lyman
James Ayer
Robert W. Newell
†Nathaniel Downes
†Pierre B. Mignault
Robert White
†Elie Lacerte

1846.

G. S. Jones
*Samuel Hamblen
†E. G. Kelley
†John McCrillis
†D. W. Parker
Daniel V. Folts
*†Jesse Merrill
‡Wm. R. Lawrence
*John B. Alley
Fred. S. Ainsworth
†Henry Osgood Stone
I. W. Tobie
J. W. Hinckley
Edward H. Clarke
†M. O. R. Reedy

1847.

James F. Harlow
†Patrick E. Molloy
*Benjamin P. F. Randall
*James W. Stone
†Charles F. Heywood
‡†Robert T. Davis
Francis Minot
*†L. B. Coles
D. D. Slade
E. B. Moore
†Joseph Hagar

1848.

James Hyndman
*Alanson Abbé
†Francis M. McLellan
*†M. Aurelius Moore
Henry S. Lee
W. S. Coffin
†F. Willis Fisher
William Read
Luther Parks, Jr.
J. B. Upham
†Benj. F. Gilman
†M. Mattson
*†A. B. Malcolm
*†Thomas Andrews, Jr.
*William Pitt

1849.

Henry W. Williams
F. A. Willard
‡John Bacon, Jr.

1850.
Franklin F. Patch

1851.
†T. Fletcher Oakes

1852.
*J. Randolph Lincoln
*Henry Willard
George F. Bigelow
J. L. Williams
S. F. Parcher
E. T. Eastman
E. A. W. Harlow
Josiah Curtis
Robert Greer
†J. M. Sharkey
*D McGowan
†J. E. Herrick
J. C. Sharp
B. S. Shaw
†Augustine Shurtleff
Calvin Ellis

1853.
Richard M. Hodges
S. L. Sprague
Charles D. Homans
George H. Gay
D. McB. Thaxter
†W. B. Morris
W. H. Thorndike
J. Nelson Borland
Horatio R. Storer
*John C. York
William H. Page
Algernon Coolidge
*Horace W. Adams
*‡Edward B. Everett

1854.
John P. Reynolds
†S. C. Blake
*David Roberts
George Fabyan
John I. De Grasse

1855.
†Charles I. Putnam
Calvin G. Page
Adino B. Hall
Horace Richardson
John B. Hill
*†S. Foster Haven, Jr.
Zabdiel B. Adams
Charles M. Weeks

1856.
*Robert Ware
†Charles A. Robertson

1857.
*Thomas Lynch
William Osgood
L. M. Sargent
†Charles E. Briggs

1858.
†C. Ellery Stedman
Henry K. Oliver
†William Dickinson
Samuel A. Green
Benjamin Campbell
George S. Hyde
Enoch C. Rolfe
James C. White
John A. Lamson

1859.
Alexander D. Sinclair
Alfred C. Garratt
Stephen Mighill
David W. Cheever
John F. Jarvis
Charles D. Cleaveland
Norman C. Stevens
Antoine Ruppaner
Joseph F. Gould
John R. Mansfield

1860.
*John C. Dalton
Marcus B. Leonard
B. Joy Jeffries
Gustavus Hay
Carl Both
John Stearns
†John W. Sawyer
Charles F. Crehore
Ira L. Moore

1861.
John Green
William E. Rice
Joseph W. Cushing

1862.
Thomas M. Drummond
Howard F. Damon
John P. Ordway

1863.
Marcus S. Carpenter
Stephen W. Bowles
Edward M. Skinner
W. C. Flowers
D. K. Warren
C. C. Street
Paschal P. Ingalls
A. V. Tourtelot
J. F. Hurley
W. O. Johnson

1864.
H. M. Saville
J. H. Warren
J. B. Treadwell
S. H. Carney
J. G. Blake
James Smythe
H. L. Shaw

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